

APPLICATION DATA SHEET

Application Information

Application Number::

Filing Date::

Application Type:: Regular

Subject Matter:: Utility

Suggested Classification::

Suggested Group Art Unit::

CD-ROM or CD-R?::

Number of CD Disks::

Number of Copies of CDs::

Sequence Submission?::

Computer Readable Form (CRF)?::

Number of Copies of CRF::

Title:: SPHEROIDS, PREPARATION METHOD
THEREOF AND PHARMACEUTICAL
COMPOSITIONS

Attorney Docket Number:: 017753-205

Request for Early Publication?:: No

Request for Non-Publication?:: No

Suggested Drawing Figure::

Total Drawing Sheets::

Small Entity?: No

Latin Name:

Variety Denomination Name:

Petition Included?: No

Petition Type:

Licensed US Govt. Agency:

Contract or Grant Numbers:

Secrecy Order in Parent Appl.?: No

Applicant Information

Applicant Authority Type: Inventor

Primary Citizenship Country: France

Status: Full Capacity

Given Name: Philippe

Middle Name:

Family Name: CHENEVIER

Name Suffix:

City of Residence: Montreal

State or Province of Residence: Quebec

Country of Residence: Canada

Street of Mailing Address: 5656 rue Woudbury

City of Mailing Address: Montreal

State or Province of Mailing Address:: Quebec

Country of Mailing Address:: Canada

Postal or Zip Code of Mailing Address:: H3T 1F7

Applicant Authority Type:: Inventor

Primary Citizenship Country:: France

Status:: Full Capacity

Given Name:: Dominique

Middle Name::

Family Name:: MARECHAL

Name Suffix::

City of Residence:: Dreux

State or Province of Residence::

Country of Residence:: France

Street of Mailing Address:: 26A12, boulevard de l'Europe

City of Mailing Address:: Dreux

State or Province of Mailing Address::

Country of Mailing Address:: France

Postal or Zip Code of Mailing Address:: F-28100

Correspondence Information

Correspondence Customer Number:: 21839

Phone Number:: (703) 836-6620

Fax Number: (703) 836-2021

Representative Information

Representative Customer Number:: 21839

Domestic Priority Information

Application::	Continuity Type::	Parent Application:: Parent Filing Date::
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This Application	National Stage of	PCT/FR2003/002909 10/03/03
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Foreign Priority Information

Country::	Application Number::	Filing Date::	Priority Claimed::
France	02/12333	10/04/02	Yes

18/530052

JC17 Rec'd PCT/PTO 04 APR 2005

Assignee Information

Assignee Name:: ETHYPHARM

Street of Mailing Address:: 21, rue Saint-Mathieu

City of Mailing Address:: Houdan

State or Province of Mailing Address::

Country of Mailing Address:: France

Postal or Zip Code of Mailing Address:: F-78550